Date: 11/20/2018

Time: 09:43:59 AM

Location: WAS

UNITED STATES DEPARTMENT OF JUSTICE FEDERAL BUREAU OF PRISONS

Request for Withdrawal of Inmate's Personal Funds

Please charge to my account the sum of \$5.00 and authorize the same to be paid to:

Contact/FMIS Certification/Address
States District Ct, United
300 S 4TH ST
Attn:Clerk of Court
MINNEAPOLIS
MN 55415
United State's

Purpose: Court Fees
Check Memo: Writ of Habeas

Milesson Marie Mullips (Signature of Inmate)

45209424 - PHILLIPS, CHERRON

(Inmate Register No./Name)

(Signature of Approving Official)

(Signature of Deposit Fund Tech)

(Payment #)

The inmate's personal account has been charged in the amount indicated above.

SCANNED / NOV 2 9 2018

HS DISTRICT COURT MPLS

BP - 199.045 - Jan 2008